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FROM McANDREWS, HELD, & MALLOY

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(TUE) 2. 7' 06 14:34/ST. 14:32/NO. 4861050665 P 2

PTO/SB/21 (09-04)

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<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)		Application Number	09/699,019
		Filing Date	October 27, 2000
		First Named Inventor	Ahmadreza Rofougaran
		Art Unit	2682
		Examiner Name	Marceau Milord
		Attorney Docket Number	15258US05
Total Number of Pages in This Submission		23	
<b>ENCLOSURES (check all that apply)</b>			
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Response (19 Pages) <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	
		<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Return-Receipt Postcard <input type="checkbox"/> Other Enclosure(s) (please identify below):	
Remarks		Extension of Time Request filed in Duplicate.	
<b>SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT</b>			
Firm	McAndrews Held & Malloy, Ltd.		
Signature	<i>Michael T. Cruz</i>		
Printed Name	Michael T. Cruz		
Date	February 7, 2006		
<b>CERTIFICATE OF FAX TRANSMITTAL</b>			
I hereby certify that this correspondence is being sent via facsimile transmission to Examiner Marceau Milord at the United States Patent and Trademark Office, fax No. 571 273 8300, on February 7, 2006.			
Name (Print/type)	Michael T. Cruz	Registration No. (Attorney/Agent)	44,636
Signature	<i>Michael T. Cruz</i>	Date	February 7, 2006

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FROM McANDREWS, HELD, &amp; MALLOY CENTRAL FAX CENTER

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Approved for use through 07/31/2006. OMB 0651-0032  
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

PTO/SB/H7 (12-04)

Effective on 12/08/2004.  
Fees pursuant to the consolidated Appropriates Act, 2005 (H.R. 4818).

# FEE TRANSMITTAL for FY 2005

Complete if Known

Application Number	09/699,019
Filing Date	October 27, 2000
First Named Inventor	Anmadreza Rofougaran
Examiner Name	Marceau Milord
Art Unit	2682
Attorney Docket No.	15258US05

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$)  
120.00

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_

☒ Deposit Account Deposit Account Number: 13-0017

Deposit Account Name: McAndrews Held & Malloy

For the above-identified deposit account, the Director is hereby authorized to (check all that apply)

☒ Charge Fee(s) indicated below

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☒ Charge any additional fee(s) or underpayments of fees(s) ☒ Credit any overpayments under 37 CFR 1.16 and 1.17

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## FEE CALCULATION

### 1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid(\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

### 2. EXCESS CLAIM FEES

#### Fee Description

Each claim over 20, or for Reissues, each claim over 20 and more than in the original patent  
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent  
Multiple dependent claims

	Small Entity Fee (\$)	Fee (\$)
Each claim over 20, or for Reissues, each claim over 20 and more than in the original patent	50	25
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent	200	100
Multiple dependent claims	360	180

Total Claims -20 or HP Extra Claims x 50 = Fee Paid (\$)

HP = highest number of total claims paid for, if greater than 20

Indep. Claims -3 or HP Extra Claims x 200 = Fee Paid (\$)

HP = highest number of independent claims paid for, if greater than 3

Multiple Dependent Claims  
Fee Fee Paid (\$)  
0

### 3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets -100 Extra Sheets /50 Number of each additional 50 or fraction thereof x Fee (\$)  
Fee Paid (\$)

### 4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other: Petition for One-Month Extension of Time

120.00

### SUBMITTED BY

Signature	<u>Michael T. Cruz</u>	Registration No. (Attorney/Agent)	44,635	Telephone	(312) 775-8084
Name (print/type)	Michael T. Cruz	Date	February 7, 2006		